



## APPLICATION TO BE A PARTY TO A PUBLIC HEARING

I, \_\_\_\_\_, request to become a party to the public hearing before  
the West Brandywine Township \_\_\_\_\_  
(ZONING HEARING OR CONDITIONAL USE HEARING)

on the application of \_\_\_\_\_, advertised to be held  
on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Legal Counsel Representation?      Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide the name and contact information of Legal Counsel

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Are you adjacent to or adjoin the subject property?    Yes \_\_\_\_\_ No \_\_\_\_\_

If no, what is the distance to the subject property? \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

**TOWNSHIP USE ONLY:**

Date Application Received: \_\_\_\_\_

Hearing \_\_\_\_\_